

06-13-03

2172/1

## Express Mail Mailing Label No. EV174099566US



**TRANSMITTAL  
FORM**

Application Serial Number	09/785,607
Filing Date	February 16, 2001
First Named Inventor	Green et al.
Group Art Unit	2172
Examiner Name	Fleurantin, J. B.
Attorney Docket No.	SRT-014
Patent No.	Not applicable
Issue Date	Not applicable

**ENCLOSURES (check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Check Attached</li> <li><input type="checkbox"/> Copy of Fee Transmittal Form</li> </ul>	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Preliminary</li> <li><input type="checkbox"/> After Final</li> <li><input type="checkbox"/> Affidavits/declaration(s)</li> <li><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets 7]</li> </ul>	<input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Appeal Brief (in triplicate)
	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal	<input type="checkbox"/> Status Inquiry
	<input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)	<input checked="" type="checkbox"/> Return Receipt Postcard
	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8
<input checked="" type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application	<input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8
<input type="checkbox"/> Information Disclosure Statement <ul style="list-style-type: none"> <li><input type="checkbox"/> Form PTO-1449</li> <li><input type="checkbox"/> Copies of IDS Citations</li> </ul>	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD(s) for large table or computer program	
<input type="checkbox"/> Sequence Listing submission <ul style="list-style-type: none"> <li><input type="checkbox"/> Paper Copy/CD</li> <li><input type="checkbox"/> Computer Readable Copy</li> <li><input type="checkbox"/> Statement verifying identity of above</li> </ul>	<input type="checkbox"/> Amendment After Allowance	
	<input type="checkbox"/> Request for Certificate of Correction <ul style="list-style-type: none"> <li><input type="checkbox"/> Certificate of Correction (in duplicate)</li> </ul>	

**RECEIVED**

JUN 17 2003

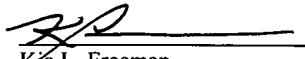
Technology Center 2100

**CORRESPONDENCE ADDRESS****SIGNATURE BLOCK**

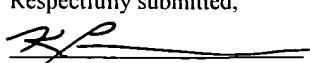
Direct all correspondence to: Patent Administrator  
 Testa, Hurwitz & Thibeault, LLP  
 High Street Tower  
 125 High Street  
 Boston, MA 02110  
 Tel. No.: (617) 248-7000  
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Date: June 12, 2003  
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Respectfully submitted,

  
 Kia L. Freeman  
 Attorney for the Applicants  
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 High Street Tower  
 125 High Street  
 Boston, MA 02110

<p style="text-align: center;"><b>O'FEE TRANSMITTAL</b> FY 2003 <b>JUN 12 2003</b></p>		<i>Complete if Known</i>	
		Application Serial Number	09/785,607
		Filing Date	February 16, 2001
		First Named Inventor	Green et al.
		Group Art Unit	2172
		Examiner Name	Fleurantin, J. B.
Attorney Docket No.	SRT-014		
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		Technology Center 2100	

METHOD OF PAYMENT			FEE CALCULATION (continued)		
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other			3. ADDITIONAL FEES		
2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit. 3. <input type="checkbox"/> Applicant claims small entity status.			Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description
					Fee Paid
			130	65	Surcharge - late filing fee or oath
			50	25	Surcharge - late provisional filing fee or cover sheet
			130	130	Non-English specification
			2,520	2,520	Request for ex parte reexamination
			110	55	Extension for reply within first month
			410	205	Extension for reply within second month
			930	465	Extension for reply within third month
			1450	725	Extension for reply within fourth month
			1970	985	Extension for reply within fifth month
			320	160	Notice of Appeal
			320	160	Filing a brief in support of an appeal
			280	140	Request for oral hearing
			130	130	Petitions to the Commissioner
			180	180	Submission of Information Disclosure Statement
			750	375	Filing a submission after final rejection (37 CFR 1.129(a))
			750	375	For each additional invention to be examined (37 CFR 1.129(b))
			100	100	Certificate of Correction for applicant's error
			Other fee (Specify)		
			Other fee (Specify)		
			SUBTOTAL (3) (\$ 110.00)		
1. FILING FEE			Large Entity <b>Fee (\$)</b> <b>Fee Description</b> <b>Fee Paid</b>		
750 Utility filing fee 330 Design filing fee 160 Provisional filing fee					
			Number Filed	Number Extra	Rate Amount
			Total Claims	- 20 =	x \$ 18.00 =
			Independent Claims	- 3 =	x \$ 84.00 =
			<input type="checkbox"/> Multiple Dependent Claim(s), if any		\$280.00 =
			TOTAL:		
			SMALL ENTITY DISCOUNT:		
			SUBTOTAL (1) (\$)		
2. AMENDMENT CLAIM FEES			Claims Highest No. Present Rate Fee Paid Remaining Previously Extra After Amend. Paid For		
Total - = x \$ 18.00 = Indep. - = x \$ 84.00 = <input type="checkbox"/> First Presentation of Multiple Dep. Claim + \$280.00 =			SUBTOTAL (3) (\$ 110.00)		
			SUBTOTAL (1) SUBTOTAL (2) SUBTOTAL (3) (\$ 110.00)		
			TOTAL (\$ 110.00)		
CORRESPONDENCE ADDRESS			SIGNATURE BLOCK		
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100			Respectfully submitted,  Kja L. Freeman Attorney for the Applicants Testa, Hurwitz & Thibeault, LLP High Street Tower-125 High Street Boston, MA 02110		